



LOS ANGELES COUNTY COMMISSION ON HIV

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STANDARDS OF CARE COMMITTEE MEETING MINUTES

April 7, 2011

Approved
5/5/2011

MEMBERS PRESENT	MEMBERS ABSENT	PUBLIC	HIV EPI AND OAPP STAFF	COMM STAFF/ CONSULTANTS
Angélica Palmeros, <i>Co-Chair</i>	Anthony Braswell	Robert Butler	None	Jane Nachazel
Fariba Younai, <i>Co-Chair</i>	David Giugni	Miki Jackson		Glenda Pinney
Carla Bailey	Jeffrey Goodman	Jason Wise		Craig Vincent-Jones
Mark Davis	Chris Villa			
Terry Goddard	Jocelyn Woodard			
Louis Guitron				
Bradley Land				
Jenny O'Malley				
Carlos Vega-Matos				

CONTENTS OF COMMITTEE PACKET

- 1) **Agenda:** Standards of Care Committee Agenda, 4/7/2011
- 2) **Minutes:** Standards of Care (SOC) Committee Meeting Minutes, 3/3/2011
- 3) **Article:** HIV Quality Performance Measures in a Large Integrated Health Care System, 2011
- 4) **Article:** Development of National and Multiagency HIV Care Quality Measures, 9/15/2010
- 5) **Standards of Care:** Residential Care and Housing Services Standards of Care, Combined Draft #2, 4/7/2011

1. **CALL TO ORDER:** Ms. Palmeros called the meeting to order at 9:45 am.
2. **APPROVAL OF AGENDA:**
MOTION #1: Approve the Agenda Order (*Passed by Consensus*).
3. **APPROVAL OF MEETING MINUTES:**
MOTION #2: Approve the 3/3/2011 Standards of Care Committee meeting minutes (*Passed by Consensus*).
4. **PUBLIC COMMENT, NON-AGENDIZED:** There were no comments.
5. **COMMISSION COMMENT, NON-AGENDIZED:**
 - Mr. Land recently learned ADAP provides co-payment training for those making 400% or more of FPL. He expressed concern that ADAP's recent certification training indicated preparation for administering a range of co-payments at a time when the Commission's Health Insurance Premium/Cost-Sharing (HIP/C-S) service category has not yet been implemented.
 - Ms. Palmeros noted eligibility training is required and offered periodically. Mr. Vega-Matos added only clients earning less than 400% FPL are eligible for Ryan White services. The general RFP with HIP/C-S is now being reviewed by County Counsel.
 - Mr. Goddard asked how the possible government shutdown might affect services. Mr. Vincent-Jones responded that while he did not believe there would be a government shutdown, services would not experience an immediate impact if there was one. The County has the cashflow to support services if a shutdown is not long. The impact might be felt more by providers that receive direct grants from the federal government, although they are supposed to have reserves. Individuals

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may be impacted by payment delays, although most entitlements are considered urgent. Medicare, Medicaid and Social Security will continue for a few weeks, but new applications will be delayed.

- He added that while cuts for this year may be minimal, cuts for next year's budget are likely to be deeper and require close planning.
- ➡ Agreed to change the committee meeting time to 9:00 – 11:00 am, same day of the month.

6. PUBLIC/COMMISSION COMMENT FOLLOW-UP: There were no comments.

7. CO-CHAIRS' REPORT:

A. **Co-Chair Nominations:** Ms. Palmeros and Dr. Younai were nominated previously. There were no new nominations.

MOTION #3: Elect Ms. Palmeros and Dr. Younai Co-Chairs of the Standards of Care Committee (***Passed by Consensus***).

B. **Committee Work Plan Review:** This item was postponed.

8. STANDARDS OF CARE:

A. Residential Care and Housing Services:

- Ms. Pinney presented the second draft of the integrated Residential Transitional and Residential Permanent Standards of Care with OAPP comments on Residential Care Services.
- There are now two residential services: Transitional Residential Care Facility (TRCF) and Residential Care Facility for the Chronically Ill (RCFCI). Previous Adult Residential Facility (ARF) was covered under Title XXII and absorbed under TRCF. ARF requirements were essentially the same as RCFCI and could not be modified to reflect eligibility and staffing pattern needs for those more self-reliant. Local health, safety and zoning codes pertain when Title XXII does not.
- TRCF specifically targets those who do not need 24-hour care, but do need assistance in developing self-sufficiency.
- RCFCI has not changed appreciably. It has added eligibility requirements for regular or on-going assistance with Activities of Daily Living, a Karnofsky score of 70 or less and a 24-month time limit with extensions if needed.
- The Standard's Housing Services includes Hotel/Motel and Meal Vouchers, Emergency Shelter (changed from Emergency Housing for improved specificity), Transitional Housing and Permanent Supportive Housing (changed from Independent Housing for improved specificity) programs.
- Mr. Vincent-Jones noted the full standards of care will have an outcomes/measures section in place of separate sections in each Standard. The section will be based on OAPP's performance indicators and the work by the Expert Review Panels, and will eventually synchronize with the Evaluation of Service Effectiveness (ESE).
- ➡ Mr. Goddard will send research on the impact of stable housing on PWH for potential inclusion.
- ➡ Mr. Vega-Matos will send the definition for "qualified mental health professional" to Ms. Pinney and she will add it to "Definitions and Descriptions" starting on page 8.
- ➡ Mr. Vega-Matos will check Title XXII animal/pet requirements to be included in the standard. It is most likely that only certified service animals are allowed under Title XXII.
- ➡ Clarify on page 5 that Housing Services have an element of supportive services and do not include independent housing.
- ➡ Ms. Pinney will add a link for the Housing Resource Center database.
- ➡ Mr. Vega-Matos will work with Ms. Pinney to develop the presentation for the Commission meeting.
- ➡ Add to "parking lot" issues: Discuss including rental assistance, such as Section 8, under Direct Emergency Financial Assistance.

MOTION #4: (Vega-Matos/Land) Adopt Residential Care and Housing Services Standards of Care with modifications as discussed (***Passed by Consensus***).

B. **Case Management, Housing:** This item was postponed.

C. **Medical Care Coordination (MCC):** This item was postponed.

D. **Health Insurance Premiums/Cost-Sharing (HIP/C-S):** This item was postponed.

E. **Early Intervention Services (EIS):** This item was postponed.

F. **FY 2011 RFP/Contracting Schedule:** This item was postponed.

9. PRIORITY- AND ALLOCATION-SETTING (P-AND-A) RECOMMENDATIONS: This item was postponed.

10. GRIEVANCE POLICY AND PROCEDURES: This item was postponed.

11. QUALITY MANAGEMENT REVIEW:

- Mr. Vincent-Jones noted discussions with both Mr. Vega-Matos and SOC on quality indicators. They should be included in standards, but have only been defined for a few services. They are particularly important if the Commission wants to encourage other institutions to adopt the standards.
- This is a gray area of responsibility as the administrative agency (OAPP) is charged with quality management while the Commission is charged with the continuum of care. The Commission creates a pool of broad indicators (which should include those required by HRSA or other governing bodies) and OAPP selects from that pool of indicators and refines the measures, as appropriate.
- Mr. Vega-Matos said OAPP had some indicators for most services as part of Performance-Based Monitoring, but some are more fleshed out than others. Input from Mary Orticke, Quality Management, is important for the discussion.
- Mr. Vincent-Jones noted Medical Outpatient once had some 80 indicators, but now has about 30. They should be reviewed to ensure they are consistent with both HRSA and Health Employer Data and Information Set (HEDIS) managed care indicators. Kaiser Permanente is advocating adoption of HEDIS measures by the California Department of Managed Care.
- ➡ Staff will coordinate a conference call through Juhua Wu for Mr. Vega-Matos, Ms. Orticke, Jennifer Sayles, SOC Co-Chairs and Mr. Vincent-Jones on Medical Outpatient indicators in preparation for the discussion at the May SOC meeting.

12. SPECIAL POPULATION GUIDELINES: This item was postponed.

13. EVALUATION OF SERVICE EFFECTIVENESS (ESE): This item was postponed.

14. CONTINUUM OF CARE: This item was postponed.

15. AETC REPORT: There was no report.

16. NEXT STEPS: There was no additional discussion.

17. ANNOUNCEMENTS: There were no announcements.

18. ADJOURNMENT: The meeting adjourned at 11:35 am.